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7590 04/04/2005

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 06/28/2005 HDEMESS2 00000037 09649259

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R Joseph Trojan	(Depositor's name)
	(Signature)
6/27/05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09649259	08/28/2000	Mimi T. Mok	254/242	6780

TITLE OF INVENTION: METHOD AND APPARATUS FOR OPTIMIZING, MANAGING AND SCHEDULING PERSONAL RELATIONSHIPS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	07/05/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
BAHTA, KIDEST	2125		700-090000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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Trojan Law Offices

2. _____
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

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Date 6/27/05Typed or printed name R. Joseph TrojanRegistration No. 3,4,264

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